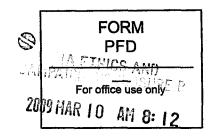
Mail to:

**IECDB** 

510 East 12th, Suite 1A Des Moines, Iowa 50319

Or Fax: (515)281-4073

Reset Form



## **Iowa Ethics and Campaign Disclosure Board**

Required by Iowa Code section 68B.35, 68B.3(2), and rules in 351 - Chapter 7.

| Please type or print legibly  Agency or department: Department of Natural Resources  Position held: DIVISION Administrator, Management Sewices Division held: DIVISION Administrator, Management Sewices Division Statewide office sought (non-incumbent candidates only): NA  This statement is for Calendar Year 2008. Check if this is an amended statement. This statement is required to cover the calendar year preceding the year the report is due.  General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.  * * * * * * * * * * * * * * * * * * *   | Personal Financial Disclosure Statement   |
|---|---|
| This statement is for Calendar Year 2008. Check if this is an amended statement.  This statement is required to cover the calendar year preceding the year the report is due.  General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.  * * * * * * * * * * * * * * * * * * *   | Name: Linda Hanson Please type or print legibly   |
| This statement is for Calendar Year 2008. Check if this is an amended statement.  This statement is required to cover the calendar year preceding the year the report is due.  General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.  * * * * * * * * * * * * * * * * * * *   | Agency or department: Department of Natural Resources   |
| This statement is for Calendar Year 2008. Check if this is an amended statement.  This statement is required to cover the calendar year preceding the year the report is due.  General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.  * * * * * * * * * * * * * * * * * * *   | Position held: <u>DIVISION Administrator</u> , Management Services Div  |
| This statement is required to cover the calendar year preceding the year the report is due.  General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.  * * * * * * * * * * * * * * * * * * *   |   |
| Part A. Business, Occupation, or Profession. By position or job title, list each business, occupation, or profession in which you were engaged during the previous calendar year, including the name and nature of each business or employer. If you were not employed by anyone other than the agency and for the position held above check here.  1   | This statement is for Calendar Year 2008. Check if this is an <u>amended</u> statement.   This statement is required to cover the calendar year <u>preceding</u> the year the report is due.  |
| occupation, or profession in which you were engaged during the previous calendar year, including the name and nature of each business or employer. If you were not employed by anyone other than the agency and for the position held above check here.  1. 2.  Part B. Income sources of more than \$1,000. In the categories below list each source from which you received more than \$1000 in gross annual income during the previous calendar year. The amount or value of the holding is not required to be listed. This includes the total amount of any income received jointly with one or more persons exceeding \$1000. Do not report income received solely by your spouse or other family members. A source is reportable if the gross income produced was subject to federal or state income tax during the reporting period.* If you have nothing to report under Part B check here. | General instructions: Complete each of Parts A, B, and C below. Attach additional pages if necessary.   |
| Part B. Income sources of more than \$1,000. In the categories below list each source from which you received more than \$1000 in gross annual income during the previous calendar year. The amount or value of the holding is not required to be listed. This includes the total amount of any income received jointly with one or more persons exceeding \$1000. Do not report income received solely by your spouse or other family members. A source is reportable if the gross income produced was subject to federal or state income tax during the reporting period.* If you have nothing to report under Part B check here.   | occupation, or profession in which you were engaged during the previous calendar year, including the name and nature of each business or employer. If you were not employed by anyone other than the  |
| you received more than \$1000 in gross annual income during the previous calendar year. The amount or value of the holding is not required to be listed. This includes the total amount of any income received jointly with one or more persons exceeding \$1000. Do not report income received solely by your spouse or other family members. A source is reportable if the gross income produced was subject to federal or state income tax during the reporting period.* If you have nothing to report under Part B check here.  | 1   |
| 1. Securities. List any company in which you owned securities   | you received more than \$1000 in gross annual income during the previous calendar year. The amount or value of the holding is not required to be listed. This includes the total amount of any income received jointly with one or more persons exceeding \$1000. Do not report income received solely by your spouse or other family members. A source is reportable if the gross income produced was subject to federal or state income tax during the reporting period. If you have nothing to report under Part B check |
| 1. N/A<br>2   | 1. NA<br>2.   |

| 2. Instruments of Financial Institutions. List the institutions from which you received income such as certificates of deposit or savings accounts.  |              |
|--|--------------|
| 1 N/A  | Reset Fo     |
| 2. 1   |              |
| 1. NA<br>2. 3.   |              |
| 3. Trusts. State the nature or type of the trusts.   |              |
| 1. N/A   |              |
| 1. NA<br>2. 3.   |              |
| 3  |              |
| 4. Real Estate. List the nature of real estate interests including an interest from which in derived from the selling of property. Do not list the location, address, or legal description | come was     |
| 1. NA<br>2   |              |
| 2  |              |
| 3  |              |
| 5. Retirement Systems. List the name of the employer/sponsor of any retirement benef   | it system.   |
|  | _            |
| 1. N/A<br>2  |              |
| 3.   |              |
| 6. Sales to political subdivisions. List any sales of a good or service to a political subdivistate if a commission from the sale was received.  | ision of the |
| ı NIA  |              |
| 1. NA<br>2. 1  | <del></del>  |
| 3.   |              |
| 7. Other. List other sources of annual gross income not reported above that were reported purposes.  | d for tax    |
| 1. NIA   |              |
| 1. NA<br>2. 1  |              |
| 3  |              |
| Part C. Certified Signature.   |              |
|  |              |
| I certify that this statement is true and accurate to the best of my knowledge. I un<br>I am subject to potential civil and criminal penalties for failing to file an accurate statement.  |              |

to file this statement by the required due date.

Molate Signature of person filing statement)

3-6-09
(Date)